

**FAX TRANSMISSION**

Matter No. 10105885

DATE: September 17, 2003

PTO IDENTIFIER: Application Number 09/484,260  
Patent Number

Inventor: Thomas C. Gipson

**OFFICIAL**

MESSAGE TO: G. Suchfield

FAX NUMBER: (703) 872-9306

Telephone Number (703) 308-2152

FROM: Fulbright & Jaworski L.L.P.  
Edward D. Steakley (User ID 01563)

PHONE: (713) 651-5423

Attorney Dkt. #: HO-P02233US0

**RECEIVED  
CENTRAL FAX CENTER**

SEP 17 2003

PAGES (Including Cover Sheet): 8**CONTENTS:**

Examiner Suchfield,

Please find attached 2 copies of the Revocation of power of attorney or  
authorization of agent as filed with the Patent Office on June 5, 2003.If your receipt of this transmission is in error, please notify this firm immediately by  
collect call to (713) 651-5423 and send the original transmission to us by return  
mail at the address below.Fulbright & Jaworski L.L.P.  
1301 McKinney, Suite 5100, Houston, Texas 77010-3095  
Telephone: (713) 651-5151 Facsimil : (713) 651-5246

PTO/SB/97 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## Certificate of Transmission Under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office

on September 17, 2003  
Date

RECEIVED  
CENTRAL FAX CENTER

SEP 17 2003

Elena Maglito  
Signature

Elena M. Maglito  
Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Second Supplemental Amendment as filed on April 3, 2003

# OFFICIAL

PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031

U.S. Patent and Trademark C

U.S. DEPARTMENT OF COMMERCE

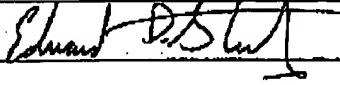
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information

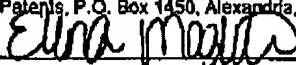
if it displays a valid MB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/484,260	
	Filing Date	January 18, 2000	
	First Named Inventor	Thomas C. Gipson	
	Art Unit	3672	
	Examiner Name	G. Suchfield	
Total Number of Pages in This Submission	2	Attorney Docket Number	HO-P02233US0

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return postcard
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	FULBRIGHT & JAWORSKI L.L.P. Edward D. Steakley
Signature	
Date	June 5, 2003

Transmittal	
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EU098495986US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: June 5, 2003	Signature:  (Elena M. Maglitta)

2530341B.1

PTO/SB/82 (05-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Off. U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT</b>	Application Number	09/484,260
	Filing Date	January 18, 2000
	First Named Inventor	Thomas C. Gipson
	Art Unit	3672
	Examiner Name	G. Suchfield
	Attorney Docket Number	HO-P02233US0

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☐ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☒ Please change the correspondence address for the above-identified application to:

☒ Customer Number 26271

OR

☐ Firm or Individual Name

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
**SIGNATURE of Applicant or Assignee of Record**

Name Patrick H. McCollum

Signature

*Patrick H. McCollum*

on behalf of Applicant.

Date

June 3, 2003

Telephone

281-260-5616

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐

\*Total of

1

forms are submitted.

**Revocation of Power of Attorney or Authorization of Agent**

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No EU098495966US in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 6/5/03

Signature:

*Elena M. Maglito*

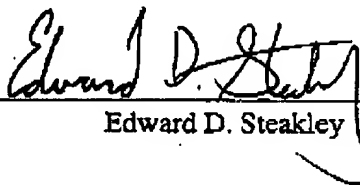
(Elena M. Maglito)

Application No.: 09/484,260

**CERTIFICATE OF SERVICE**

I do hereby certify that a copy of the Revocation of Power of Attorney or Authorization of Agent, in a manner provided in 37 CFR 1.248, is being deposited with the United States Postal Service on September 17, 2003, addressed to:

Cynthia G. Seal  
2925 Briarpark, Suite 930  
Houston, Texas 77042

  
Edward D. Steakley

E0420T-80250006

PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0851-0031  
U.S. Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.**TRANSMITTAL  
FORM**

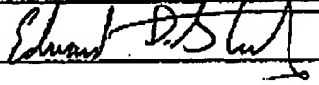
(To be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b>  (To be used for all correspondence after initial filing)	Application Number	09/484,260	
	Filing Date	January 18, 2000	
	First Named Inventor	Thomas C. Gipson	
	Art Unit	3672	
	Examiner Name	G. Suchfield	
Total Number of Pages in This Submission	2	Attorney Docket Number	HO-P02233US0

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return postcard
Remarks  		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	FULBRIGHT & JAWORSKI L.L.P. Edward D. Steakley
Signature	
Date	June 5, 2003

**Transmittal**

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EU098495966US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: June 5, 2003

Signature:



(Elena M. Magillio)

25303416.1

ED04207" 80250006